FORM D

RECEIVED 2001

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB	ADDD	αv	A I
UNVIN	APPR		ALI.

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response: 16.00

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEIV	VED			

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Triax Holdings LLC: Issuance of Warrants to Purchase Preferred Units, Warrants to Purchase Common Units and Membership Units						
]Rule 504	_ Rule 505	⊠Rul	le 506		ion 4(6) ULOE
Type of Filing:	Q.	New Filing			Amendn	nent
	A. BASI	C IDENTIFICATION I	DATA			
1. Enter the information requested about the iss	suer					
Name of Issuer (check if this is an amendmen	t and name has	changed, and indicate ch	nange.)			
Triax Holdings LLC		.	J ,			THE RESERVE TO SERVE THE PROPERTY OF THE PARTY OF THE PAR
Address of Executive Offices	(Number and	Street, City, State, Zip C	ode)	Telepho	ne Numb	07079588
20 Commerce Drive, Suite 232, Cranford, NJ 0	7016			(908) 31	72-0500	V · ·
Address of Principal Business Operations	(Number and	Street, City, State, Zip C				(metuding Area Code)
		<u> </u>	HOCE	SSEC)	
Brief Description of Business					17	
			OCT 11;	2007	6	
Research, development and distribution of pharm	naceuticals.					
Type Corporation	limited par	tnership, already formed		ON [⊠other (plea	ase specify)
business trust	☐limited part	tnership, to be formed	FINANCI	IAL I	Limited liabi	lity company
		<u>Month</u>	<u>Year</u>			
Actual or Estimated Date of Incorporation or Or	ganization:	June	2005	[⊠Actual	□ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE						
	CN for Canad	a, FN for other foreign ju	urisdiction)			
			•		•	

GENERAL INSTRUCTIONS

Fadoral

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Executive Officer Promoter Beneficial Owner Check Box(es) General and/or Managing Partner □ Director that Apply: Full Name (Last name first, if individual) Joseph Krivulka Business or Residence Address (Number and Street, City, State, Zip Code) 20 Commerce Drive, Suite 232, Cranford, NJ 07016 Beneficial Owner Check Box(es) □ Promoter General and/or Managing Partner that Apply: ☑ Director Full Name (Last name first, if individual) Leonard Mazur Business or Residence Address (Number and Street, City, State, Zip Code) 20 Commerce Drive, Suite 232, Cranford, NJ 07016 Check Box(es) Promoter **⊠**Beneficial Owner ☐ Executive Officer General and/or Managing Partner ☐ Director that Apply: Full Name (Last name first, if individual) Tri-View Investments, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 1919 Pennsylvania Avenue, Washington, DC 20006 Beneficial Owner Executive Officer □Promoter Check Box(es) General and/or Managing Partner ☑ Director that Apply: Full Name (Last name first, if individual) Susan Mayer Business or Residence Address (Number and Street, City, State, Zip Code) 20 Commerce Drive, Suite 232, Cranford, NJ 07016 Beneficial Owner Executive Officer Promoter Check Box(es) that Apply: ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) John Shulman Business or Residence Address (Number and Street, City, State, Zip Code) 20 Commerce Drive, Suite 232, Cranford, NJ 07016 ☐Beneficial Owner □ Executive Officer Check Box(es) Promoter General and/or Managing Partner that Apply: Director Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner that Apply:

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

B. INFORMATION ABOUT OFFERING												
1. Has	the issuer so	old, or does t	he issuer in	tend to sell,	to non-accre	dited invest	ors in this o	ffering?		Yes 🗌	No 🗵	
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?												
3. Doe	3. Does the offering permit joint ownership of a single unit?						Yes 🗵	No 🗌				
4.	Enter the	information	requested f	or each pers	on who has	been or will	be paid or s	given, direct	ly or indirec	tly, any comn	nission or s	similar
remi	uneration for	solicitation	of purchase	ers in connec	ction with sa	les of securi	ities in the o	ffering. If a	person to be	e listed is an a	ssociated	person or
ager pers	it of a broke ons to be lis	r or dealer re ted are assoc	egistered wit ciated persor	in the SEC a	ing/or with a broker or de	aler, you ma	ies, fist the r ay set forth t	the informat	ion for that b	aler. If more or deal	er only.	3)
	persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)											
	(,										
Ducines	s or Residen	ce Address (Number	1 Street City	v State Zin	Code)						
busines	s or Residen	ce Address (Number and	i sireet, Cit	y, State, Zip	Code)						
Name of	f Associated	Broker or D	ealer									
States in	Which Pers	on Listed H	as Solicited	or Intends t	o Solicit Pu	rchasers						-
•	"All States"			-						All States		rin:
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[TX]	[VII]	[VT]	[VA]	[VA]	[WA]	[WI]	[WY]	(PR]
	me (Last nan			[]	[]		[;	<u> </u>	[]			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
1 411 1 141	no (Dust num											
	5 1		21 1	1.6	C	C-1-\						
Busines	s or Residen	ce Address (Number and	a Street, Cit	y, State, Zip	Code)						
Name of	f Associated	Broker or D)ealer									
	Which Pers									All States		
(Check	"All States" [AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	(FL)	All States [GA]	□ [HI]	[ID]
[IL]	[N]	[IA]	[KS]	[KY]	[LA]	[O.] [ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[נא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WA]	[WI]	[WY]	[PR]
Full Nar	ne (Last nan	ne first, if in	dividual)									
Busines	s or Residen	ce Address (Number and	Street, Cit	y, State, Zip	Code)						
			•									
Name of	f Associated	Broker or D	ealer ealer			<u>-</u>						
States in	Which Pers	on Listed H	as Solicited	or Intends t	o Solicit Pur	rchasers						
	"All States"									All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA)
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WA]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offering for exchange and already exchanged. Type of Security Aggregate Offering Price Amount Already Sold Debt..... -0-Equity..... -0--0-Preferred ☐ Common Convertible Securities (including warrants)..... -0--0--0-Partnership Interests..... Other (Specify Warrants to Purchase Membership Units and Membership \$118,428,618 \$<u>118,428,618</u> <u>Units</u>)..... Total \$118,428,618 \$118,428,618 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors Of Purchases \$117,696,175 Accredited Investors Non-accredited Investors 20 \$ 732,443 Total (for filings under Rule 504 only)..... -0-Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Offering Type of Security Dollar Amount Sold Rule 505..... -0--0--0--0-Regulation A -0--0-Rule 504..... Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees

.....

Printing and Engraving Costs

Legal Fees

Accounting Fees.....

Engineering Fees.....

Sales Commissions (specify finders' fees separately)

Other Expenses (Identify) Filing fees

b. Enter the difference between the aggregate offering price given in response to

Part C - Question 1 and total expenses furnished in response to Part C -

Question 4.a. This difference is the "adjusted gross proceeds to the issuer"

Total.....

-0-

-0-

-0-

-0-

2,750

902,750

\$ 117,525,868

900,000

(X)

X

囟

proposed to be used for each of the purposes shown. If the amount for ar purpose is not known, furnish an estimate and check the box to the left of estimate. The total of the payments listed must equal the adjusted gross properties to the issuer set forth in response to Part C - Question 4.b above.	fthe	Payments To Others
Salaries and fees	<u> </u>	□ \$ -0-
Purchase of real estate	<u> </u>	\$ -0-
Purchase, rental or leasing and installation of machinery and equipment		\$ -0-
Construction or leasing of plant buildings and facilities.		□ \$ <u> </u>
Acquisition of other businesses (including the value of securities involved in offering that may be used in exchange for the assets or securities of another is	this ssuer	
pursuant to a merger)		<u> </u>
Repayment of indebtedness	 -	□ \$ <u> -0-</u>
Working capital	· · · · · · · · · · · · · · · · · · ·	⊠ <u>\$117,525,868</u>
Other (specify):	_	□\$ -0-
Column Totals	\$ <u>-0-</u>	\$
Total Payments Listed (column totals added)	<u>IX</u> J	<u>\$117,525,868</u>
D. FEDERAL S	IGNATURE	
The issuer had duly caused this notice to be signed by the undersigned duly a signature constitutes an undertaking by the issuer to furnish to the U.S. Secur information furnished by the issuer to any non-accredited investor pursuant to	rities and Exchange Commission, upon	
Issuer (Print or Type)	Signature	Date 10 2 2 2007
TRIAX HOLDINGS LLC	170(1)/1/5	10/3/2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	September, 2007
Leonard Mazur	Chief Operating of	ficer 10/3/2007
	\mathcal{ENI}	
ATTENT Intentional misstatements or omissions of fact constitute		J.S.C. 1001.)

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or